Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Khaled First name N Middle name Nasr Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6084	

	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
names and diffication you have t 8 years ames and as names	■ I have not used any business name or EINs. Business name(s)		☐ I have not used any business name or EINs. Business name(s)
	EIIN		EIN
	1368 Academy Lane		If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code		Number, Street, City, State & ZIP Code
	County		County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code
noosing file for	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
t	ification you have 8 years mes and as names	I have not used any business name or EINs. Business name(s) Business name(s) EIN 1368 Academy Lane Teaneck, NJ 07666 Number, Street, City, State & ZIP Code Bergen County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	I have not used any business name or EINs. Business name(s) EIN 1368 Academy Lane Teaneck, NJ 07666 Number, Street, City, State & ZIP Code Bergen County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

Par	t 2: Tell the Court About	our B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> f page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.		
	choosing to file under	□с	☐ Chapter 7					
		□с	hapter 11					
		□с	hapter 12					
		■ C	hapter 13					
8.	How you will pay the fee	•	about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with		
						oose this option, sign and attach the Application for Individuals to Pay		
			ū		ts (Official Form 103A). aived (You may request this option	n only if you are filing for Chapter 7. By law, a judge may,		
			but is not req applies to you	uired to, waive ur family size a	your fee, and may do so only if yo nd you are unable to pay the fee ir	ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out its Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	□ Ye				_		
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	9 S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No	Go to I	ne 12.				
		□ Y€	es. Has yo	ur landlord obt	ained an eviction judgment agains	t you?		
				No. Go to line	12.			
				Yes. Fill out In this bankrupto		Judgment Against You (Form 101A) and file it as part of		

ar	Report About Any Bu	sinesses '	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	iness
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		
	If you have more than one		Number, Street, City, Stat	te & ZIP Code
	sole proprietorship, use a separate sheet and attach			
	it to this petition.			x to describe your business:
			_	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as d)	efined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			□ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor chorproceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small busine you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu § 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.		11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Pari	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to public health or safety?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,

Signature of Debtor 2

MM / DD / YYYY

Executed on

and 3571.

/s/ Khaled N Nasr Khaled N Nasr

Signature of Debtor 1

Executed on August 3, 2020

MM / DD / YYYY

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stuart M. Nachbar	Date	August 3, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Stuart M. Nachbar		
Printed name		
Law Office of Stuart M. Nachbar, P.C.		
Firm name		
354 Eisenhower Parkway, Suite 2025		
P.O. Box 2205		
Livingston, NJ 07039		
Number, Street, City, State & ZIP Code		
Contact phone 973-567-0954	Email address	Stuart@snanj.com
SN-9998 NJ		
Bar number & State		

Debtor 1							8/03/20 4:54PM
Part Name Mode Name Last	Fill in	this information	to identify your	case:			
Debtor 2 Prist Name Lost Name Lost Name Lost Name	Debto						
District First Name Model-Name Laist Name Laist	Dobte		Name	Middle Name	Last Name		
Case number Check if this is an amended filing Official Form 106Sum Check if this is an amended filing Official Form 106Sum Check if this is an amended filing Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Fant 1: Summarize Your Assets You			Name	Middle Name	Last Name		
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form, if you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Port II: Summarize Your Assets Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B. 1b. Copy line 62, Total personal property, from Schedule A/B. 1c. Copy line 62, Total personal property, from Schedule A/B. 1c. Copy line 63, Total of all property on Schedule A/B. 2c. Schedule D. Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D. Schedule E/F: Creditors Who Have Claims Secured by Property (Official Form 106D) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 66 of Schedule E/F. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E) 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 66 of Schedule E/F. Schedule E/F: Creditors Who Pare Unsecured Claims (Official Form 106E) 5chedule E/F: Vour Income and Expenses Your total liabilities 717,431.44 Pour total liabilities Answer These Questions for Administrative and Statistical Records A rey you filing for bankruptcy under Chapters 7, 11, or 137 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or	Unite	d States Bankrupto	y Court for the:	DISTRICT OF NEW JE	RSEY		
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part	1						
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the Information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Point III Summarize Your Assets Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 1a Copy line 55, Total real estate, from Schedule A/B	(if knov	vn)				_	
Burnmary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your chedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own						am	enaea filing
Burnmary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your chedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets	Offi	cial Form 1	<u>06Sum</u>				
information. Fill out all of your schedules first, then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own	Sun	nmary of Yo	ur Assets a	and Liabilities a	nd Certain Statistical Information		12/15
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 65, Total real estate, from Schedule A/B	inforn your o	nation. Fill out all o original forms, you	of your schedule must fill out a	es first; then complete t	he information on this form. If you are filing amen		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 65, Total real estate, from Schedule A/B						V	
1a. Copy line 55, Total real estate, from Schedule A/B							
1a. Copy line 55, Total real estate, from Schedule A/B	4	Cabadula A/B. Dua	manths (Official E	1064/D)			,
1c. Copy line 63, Total of all property on Schedule A/B						\$_	550,000.00
Part 2: Summarize Your Liabilities Your liabilities Amount you owe		1b. Copy line 62, To	otal personal pro	perty, from Schedule A/B.		\$_	174,482.55
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 485,468.87 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1c. Copy line 63, To	otal of all property	on Schedule A/B		\$_	724,482.55
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Part 2	2: Summarize Y	our Liabilities				
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F						V	- P-1-194
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 485,468.87 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F							
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 485,468.87 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	2.	Schedule D: Credit	ors Who Have Ci	aims Secured by Propert	y (Official Form 106D)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>						. \$_	485,468.87
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	3.	Schedule E/F: Cred	litors Who Have	Unsecured Claims (Officia	al Form 106E/F)		0.007.04
Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	;	3a. Copy the total	claims from Part	1 (priority unsecured clain	ms) from line 6e of Schedule E/F	\$_	9,667.34
Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	;	3b. Copy the total	claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$_	222,295.23
Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I					Your total liabilitie	6	747 424 44
 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I					Tour total nabilities	• ——	717,431.44
Copy your combined monthly income from line 12 of Schedule I	Part 3	3: Summarize Y	our Income and	Expenses			
Copy your combined monthly income from line 12 of Schedule I	1	Schedule I: Vour In	come (Official Fo	rm 106I)			
Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or					e I	\$_	12,265.82
 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or 						\$_	10,605.19
 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or 	Part 4	Answer Thes	e Questions for	Administrative and Stat	tistical Records		
 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or 	6.	Are vou filina for l	ankruptcy unde	er Chapters 7, 11, or 13?	}		
7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or				•		our other	schedules.
7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or		■ Yes					
	7.		do you have?				
household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						r a persor	nal, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

14,923.07

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	9,667.34
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,667.34

Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the categor think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying coinformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (i Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the entire property? Current value of the entire property? Current value of the entire property?	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY Case number Cherame Official Form 106A/B Schedule A/B: Property 12/13 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the catego think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying conformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information. If any secure dates of the amount of any secured claims on creditions. Who Have Claims Secured Teaneck NJ 07666-0000 Manufactured or mobile home Land Current value of the entire property? Part 12/13	
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY Case number	
Case number Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the catego inkink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying conformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (in Answer every question. Part 12 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the current value of the entire property? portion yerotron yerot	
Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the categorhink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying conformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (in Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the entire property? Current value of the entire property? Current value of the entire property?	
In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category on think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying conformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (in Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current value of the entire property? Current value of the entire property?	k if this is an
think if fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying coninformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (information.) Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 1368 Academy Lane Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current value of the entire property? Current value of the entire property? Current value of the entire property?	j
Teaneck NJ 07666-0000 Single-family home Single-family home Do not deduct secured claims or exert the amount of any secured claims on Creditors Who Have Claims Secured Current value of the entire property? Current value of the entire property?	
Teaneck NJ 07666-0000 Land Current value of the Current value of the entire property? portion y	Schedule D:
City State ZIP Code Investment property \$550,000.00	alue of the ou own?
Timeshare Other Other Who has an interest in the property? Check one Describe the nature of your owners (such as fee simple, tenancy by the a life estate), if known. Debtor 1 only Fee simple	
Bergen Debtor 2 only	
County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:	perty

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Deb	tor 1 K	haled N Nasr		Case number (if known)	
3. C	ars, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
П	No				
_	Yes				
_	res				
3.1	Make:	Alfa Romeo	Who has an interest in the property? Check one		red claims or exemptions. Put
5.1	Model:	Stelvio	■ Debtor 1 only		secured claims on Schedule D: e Claims Secured by Property.
	Year:	2018	Debtor 2 only		, , ,
		nate mileage: 7000	Debtor 1 and Debtor 2 only	Current value of the entire property?	ne Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another	,	. ,
		on: 1368 Academy Lane, ck NJ 07666	☐ Check if this is community property	\$23,000.	923,000.00
			(see instructions)		
				Do not doduct con	and delines are supplied as Dut
3.2	Make:	Volvo	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on Schedule D:
	Model:	XC60	Debtor 1 only	Creditors Who Hav	e Claims Secured by Property.
	Year:	2019	Debtor 2 only	Current value of the	ne Current value of the
	• • •	nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	At least one of the debtors and another		
	Location	d vehicle that wife drives on: 1368 Academy Lane, ck NJ 07666	Check if this is community property (see instructions)	\$0 .	90.00
	No				
Ц	Yes				
			rn for all of your entries from Part 2, including		\$23,000.00
	_			L	
Part		be Your Personal and Household It			
Doy	ou own o	or have any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ε		goods and furnishings Major appliances, furniture, linens	, china, kitchenware		
	Yes. De	scribe			
		O . 1 111		N=00.00	
			ehold Furnishings, no single item over \$ Academy Lane, Teaneck NJ 07666	\$500.00	\$2,000.00
7. E l	ectronics				
		Televisions and radios; audio, vid- including cell phones, cameras, n	eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; music co	Illections; electronic devices
	Yes. De	scribe			
		4 Tvs. 4 Compu	ters, 4 Cellular Phones and 4 Ipads		
			Academy Lane, Teaneck NJ 07666		\$2,000.00

De	ebtor 1	Khaled N Nasr	Case number (if known)	
8.		bles of value es: Antiques and figurines; paintings, prints, or othe other collections, memorabilia, collectibles	er artwork; books, pictures, or other art objects; stamp, coin,	or baseball card collections;
	■ No □ Yes.	Describe		
9.	Example	ent for sports and hobbies es: Sports, photographic, exercise, and other hobb musical instruments	by equipment; bicycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10.	■ No	ns bles: Pistols, rifles, shotguns, ammunition, and rela Describe	ted equipment	
11.	□ No	s les: Everyday clothes, furs, leather coats, designe Describe	er wear, shoes, accessories	
		Location: 1368 Academy L	ane, Teaneck NJ 07666	\$500.00
	■ No □ Yes. Non-fa Examp	Describe rm animals bles: Dogs, cats, birds, horses Describe Kerry blue terrier dog	ent rings, wedding rings, heirloom jewelry, watches, gems, g	
14.	■ No		already list, including any health aids you did not list	Unknowr
	☐ Yes.	Give specific information		
15		he dollar value of all of your entries from Part 3 art 3. Write that number here	3, including any entries for pages you have attached	\$4,500.00
Pa	art 4: De:	scribe Your Financial Assets		
De	o you ow	vn or have any legal or equitable interest in any	r of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp □ No	oles: Money you have in your wallet, in your home,	in a safe deposit box, and on hand when you file your petition	on

Debto	r 1 Khaled N	Nasr		Case number (if known)	
				Cash Location:	
				1368	
				Academy Lane,	
				Teaneck NJ	
				07666	\$20.00
E:	institution No	ns. If you ha		ounts; certificates of deposit; shares in credit unions, brokerage houses, as with the same institution, list each.	and other similar
•	Yes			Institution name:	
				Chase Bank 2760	
		17.1.	Checking	Location: 1368 Academy Lane, Teaneck NJ 07666	\$1,091.56
		17.2.	Savings	Chase	\$104.90
				Bank of America	\$404.00
		17.3.	Checking	Account Ending 7620	\$134.69
jo ■ ¦ □ ` 20. G o	vint venture No Yes. Give specific overnment and co legotiable instrume	information Nai rporate boi nts include p	about themme of entity: nds and other negonersonal checks, case	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	.LC, partnership, and
	No				
□ `	Yes. Give specific i		about them uer name:		
E:	No .	in IRA, ERIS	SA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharing plans	
•	Yes. List each acco		tely. of account:	Institution name:	
		SEP-	IRA	UBS	\$145,110.71
		SEP-	IRA	Chase	\$520.69
Y	xamples: Agreeme	ised deposit	ts you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or o	thers
	Yes			Institution name or individual:	
23. A n	•	t for a perio	dic payment of mone	ey to you, either for life or for a number of years)	

De	ebtor 1	Khaled N Nasr	Case number (if known)	
	☐ Yes	Issuer name and description.		
24.		s in an education IRA, in an account in a qualified ABLE program C. §§ 530(b)(1), 529A(b), and 529(b)(1).	, or under a qualified state tuition pro	gram.
	Yes	Institution name and description. Separately file the rec	ords of any interests.11 U.S.C. § 521(c):	
25.	■ No	equitable or future interests in property (other than anything listed Give specific information about them	ed in line 1), and rights or powers exer	cisable for your benefit
26.	Patents	s, copyrights, trademarks, trade secrets, and other intellectual probles: Internet domain names, websites, proceeds from royalties and lic		
	■ No □ Yes.	Give specific information about them		
27.	Examp ■ No	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association hold Give specific information about them	ings, liquor licenses, professional license	es
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		·
	■ No □ Yes.	Give specific information about them, including whether you already fil	ed the returns and the tax years	
29.	Examp ■ No	support les: Past due or lump sum alimony, spousal support, child support, magnetic information	aintenance, divorce settlement, property	settlement
30.	Examp ■ No	imounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, senefits; unpaid loans you made to someone else Give specific information	sick pay, vacation pay, workers' compen	sation, Social Security
31.		ts in insurance policies		
	Examp ☐ No	oles: Health, disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insuran	ce
	■ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Term Life Insurance Location: 1368 Academy Lane, Teaneck NJ 07666	Spouse and Children	Unknown
32.	If you a	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insuran ne has died.	ce policy, or are currently entitled to rece	ive property because
	■ No □ Yes.	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or notes: Accidents, employment disputes, insurance claims, or rights to su		

Debt	tor 1	Khaled N Nasr		Case number (if known)	
	l Yes.	Describe each claim			
	No	contingent and unliquidated claims of every nature, incl	uding counterclaims o	of the debtor and rights to se	et off claims
		Describe each claim			
	No	ancial assets you did not already list Give specific information			
	Add t	the dollar value of all of your entries from Part 4, includinant 4. Write that number here			\$146,982.55
Part	5: De	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ite in Part 1.	
	No. Go	own or have any legal or equitable interest in any business-related to Part 6. Go to line 38.	ted property?		
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	J Own or Have an Interes	st In.	
	_	ı own or have any legal or equitable interest in any farm	or commercial fishin	g-related property?	
	_ `	Go to Part 7.			
	⊔ Yes	. Go to line 47.			
Part '	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
_		have other property of any kind you did not already list oles: Season tickets, country club membership	?		
		Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	I: Total real estate, line 2			\$550,000.00
56.	Part 2	2: Total vehicles, line 5	\$23,000.00		
57.		3: Total personal and household items, line 15	\$4,500.00		
58.		4: Total financial assets, line 36	\$146,982.55		
59.		5: Total business-related property, line 45	\$0.00		
60. 61		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	rail	7: Total other property not listed, line 54	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$174,482.55	Copy personal property total	\$174,482.55
63.	Total	of all property on Schedule A/B. Add line 55 + line 62		_	\$724,482.55

Fill in this infor	mation to identify your	case:		
Debtor 1	Khaled N Nasr			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				Check if this is an amended filing

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.					
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from	Check only one box for each exemption.			

Scriedule A/B that lists this property	portion you own			
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
1368 Academy Lane Teaneck, NJ 07666 Bergen County	\$550,000.00		\$25,150.00	11 U.S.C. § 522(d)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
Standard Household Furnishings, no single item over \$500.00	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
Location: 1368 Academy Lane, Teaneck NJ 07666 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
4 Tvs, 4 Computers, 4 Cellular	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
Phones and 4 Ipads Location: 1368 Academy Lane, Teaneck NJ 07666 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Location: 1368 Academy Lane, Teaneck NJ 07666	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank 2760 Location: 1368 Academy Lane,	\$1,091.56		\$1,091.56	11 U.S.C. § 522(d)(5)
Teaneck NJ 07666 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

De	ebtor 1 Khaled N Nasr			Case number (if known)	
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Savings: Chase Line from Schedule A/B: 17.2	\$104.90		\$98.75	11 U.S.C. § 522(d)(5)
	Line from Genedale AVD.			100% of fair market value, up to any applicable statutory limit	
	Checking: Bank of America Account Ending 7620	\$134.69		\$134.69	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	SEP-IRA: UBS Line from Schedule A/B: 21.1	\$145,110.71		\$145,110.71	11 U.S.C. § 522(d)(12)
	Line IIIIII Schedule AVD. 21.1			100% of fair market value, up to any applicable statutory limit	
	SEP-IRA: Chase Line from Schedule A/B: 21.2	\$520.69		\$520.69	11 U.S.C. § 522(d)(12)
	Line IIom Scriedule AVB. 21.2			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance Location: 1368 Academy Lane,	Unknown		\$0.00	11 U.S.C. § 522(d)(5)
	Teaneck NJ 07666 Beneficiary: Spouse and Children Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and ever			led on or after the date of adjustmen	t.)
	■ No				
	☐ Yes. Did you acquire the property cov☐ No	ered by the exemption wi	ithin 1	,215 days before you filed this case?	<i>?</i>
	□ No □ Ves				

					8/03/20 4:54P
Fill in this informat	ion to identify you	r case:			
Debtor 1	Khaled N Nasr				
-	First Name	Middle Name Last Name		-	
Debtor 2	First Name	Middle Name Last Name		-	
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	uptcy Court for the:	DISTRICT OF NEW JERSEY		-	
Case number					
(if known)					if this is an
				amend	ded filing
Official Form 1	106D				
		Who Have Claims Secure	ed by Propert	V	12/15
					,.,
		f two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors have	ve claims secured by	your property?			
□ No. Check this	is box and submit th	nis form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes. Fill in all	of the information I	pelow.			
	ecured Claims				
		nore than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the	he claims in alphabetion	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Bank of Ame	erica	Describe the property that secures the claim:	\$68,858.00	\$550,000.00	\$0.00
Creditor's Name		1368 Academy Lane Teaneck, NJ 07666 Bergen County			
Attn: Bankrı	uptcy				
Po Box 9822		As of the date you file, the claim is: Check all that apply.			
El Paso, TX		Contingent			
Number, Street, City	y, State & Zip Code	Unliquidated			
Who owes the debt?	Check one	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	Officer offic.	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)	oodi od		
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit					
Check if this claim community debt		Other (including a right to offset)			
	Opened 05/07 Last				

5535

Last 4 digits of account number

Active

Date debt was incurred 1/02/20

Idle Name Last Name			
Describe the property that secures the claim:	\$31,947.87	\$23,000.00	\$8,947.87
2018 Alfa Romeo Stelvio 7000 miles Location: 1368 Academy Lane,			
As of the date you file, the claim is: Check all that apply.			
Unliquidated			
☐ Disputed Nature of lien. Check all that apply.			
0 , ,	ecured		
car loan)			
☐ Statutory lien (such as tax lien, mechanic's lien)			
her			
Other (including a right to offset)			
Last 4 digits of account number 7857			
Describe the property that secures the claim:	\$384,663.00	\$550,000.00	\$0.00
1368 Academy Lane Teaneck, NJ 07666 Bergen County			*****
As of the date you file, the claim is: Check all that			
<u></u> ·			
☐ Disputed			
Nature of lien. Check all that apply.			
	ecured		
car loan)			
☐ Statutory lien (such as tax lien, mechanic's lien)			
her			
Other (including a right to offset)			
st			
	Location: 1368 Academy Lane, Teaneck NJ 07666 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or so car loan) Statutory lien (such as tax lien, mechanic's lien) Her Undiquidated Other (including a right to offset) Last 4 digits of account number 7857 Describe the property that secures the claim: 1368 Academy Lane Teaneck, NJ 07666 Bergen County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or so car loan) Statutory lien (such as tax lien, mechanic's lien) Her Judgment lien from a lawsuit	Location: 1368 Academy Lane, Teaneck NJ 07666 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number T857 Describe the property that secures the claim: 1368 Academy Lane Teaneck, NJ 07666 Bergen County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Her Judgment lien from a lawsuit Other (including a right to offset)	Location: 1368 Academy Lane, Teaneck NJ 07666 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Undepment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 7857 Describe the property that secures the claim: \$384,663.00 \$550,000.00 1368 Academy Lane Teaneck, NJ 07666 Bergen County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Undigment lien from a lawsuit Other (including a right to offset)

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

									0/0	3/20 4.541 W
Fill in this inform	nation to identify your	case:								
Debtor 1	Khaled N Nasr									
	First Name	Middle	Name	Last Nam	е					
Debtor 2	First Name	NA: alalla	Nome	Loot Nom	_					
(Spouse if, filing)	First Name	Middle	Name	Last Nam	е					
United States Bar	nkruptcy Court for the:	DISTRICT	OF NEW JERSEY							
0										
Case number							п	Check	if this is a	ın
							"		led filing	
							_		J	
Official Form	<u>n 106E/F</u>									
Schedule E	:/F: Creditors W	/ho Hav	e Unsecured	Claim	S				12/1	5
any executory cont Schedule G: Execu Schedule D: Credit left. Attach the Con name and case nun	,	that could re pired Leases (cured by Prop ge. If you hav	esult in a claim. Also li (Official Form 106G). D erty. If more space is i e no information to rep	ist executo o not incli needed, co	ry contract ude any cree py the Part	s on Schedule A/B: ditors with partially you need, fill it out	Property (Of secured clair, number the	ficial For ms that a entries in	m 106A/B) ire listed in n the boxe	and on n es on the
	II of Your PRIORITY Un									
	ors have priority unsecure	d claims aga	inst you?							
☐ No. Go to P	art 2.									
Yes.										
identify what type possible, list the	r priority unsecured claims pe of claim it is. If a claim ha e claims in alphabetical ords than one creditor holds a pa	as both priority er according to	and nonpriority amount the creditor's name. If	ts, list that o	claim here ar	nd show both priority	and nonprior	ity amoun	ts. As mucl	h as
(For an explana	ation of each type of claim, s	see the instruc	ctions for this form in the	instruction	booklet.)	Total claim	Priority amount		Nonprior amount	rity
	Revenue Service		Last 4 digits of accou	nt number		\$9,667.3		,667.34		\$0.00
P.O. Bo			When was the debt in	curred?	2018 Ta	x Year				
	Iphia, PA 19101-734	6	A f +b	411-:	in Obselve	II dhadaaan b				
	treet City State Zip Code d the debt? Check one.		As of the date you file	, the claim	is: Check a	іі іпаі арріу				
_			☐ Contingent							
■ Debtor 1 o	•		Unliquidated							
☐ Debtor 2 o	only		☐ Disputed							
Debtor 1 a	and Debtor 2 only		Type of PRIORITY uns		im:					
☐ At least or	ne of the debtors and anothe	er	☐ Domestic support of	oligations						
☐ Check if t	his claim is for a commu	nity debt	Taxes and certain or	ther debts	ou owe the	government				
Is the claim s	subject to offset?		☐ Claims for death or p	personal in	ury while yo	u were intoxicated				
■ No			Other. Specify							
☐ Yes										
Part 2: List Al	II of Your NONPRIORIT	Y Unsecure	ed Claims							
	ors have nonpriority unsec									
_ '			• •	varr athar						
	ve nothing to report in this p	arı. Submit tri	is form to the court with	your other	scriedules.					
Yes.										
unsecured clair	r nonpriority unsecured cl m, list the creditor separatel or holds a particular claim, i	y for each clai	m. For each claim listed	, identify w	nat type of cl	aim it is. Do not list of	claims already	included	in Part 1. It	f more
								Tota	al claim	

Official Form 106 E/F

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.1 \$0.00 Ally Financial Last 4 digits of account number 5828 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/17 Last Active Po Box 380901 When was the debt incurred? 7/09/19 **Bloomington, MN 55438** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Lease Other. Specify 4.2 **American Express** Last 4 digits of account number 1006 \$9,173.76 Nonpriority Creditor's Name **Bankruptcy Processing** When was the debt incurred? PO Box 8053 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Co-signor/Guarantor for Core Basics ☐ Yes Other. Specify Physical Therapy, PC 4.3 **American Express** Last 4 digits of account number 1001 \$21,840.95 Nonpriority Creditor's Name **Bankruptcy Processing** When was the debt incurred? PO Box 8053 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

 \square Obligations arising out of a separation agreement or divorce that you did not

Guarantee Signature for Amex Men's

Debts to pension or profit-sharing plans, and other similar debts

Other Specify Physical Therapy, LLC

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Debtor 1 Khaled N Nasr Case number (if known)

4.4	AmeriCredit/GM Financial	Last 4 digits of account number	0736	\$0.00			
	Nonpriority Creditor's Name	_	On and 100/40 Least Action				
	Attn: Bankruptcy Po Box 183853	When was the debt incurred?	Opened 09/16 Last Active 10/04/18				
	Arlington, TX 76096	When was the dest mounted.	10/04/10				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes		g plane, and other ominar dobte				
	Li Tes	Other. Specify Lease					
4.5	Amex	Last 4 digits of account number	9593	\$0.00			
	Nonpriority Creditor's Name	_					
	Correspondence/Bankruptcy Po Box 981540	W/	Opened 06/16 Last Active				
	El Paso, TX 79998	When was the debt incurred?	01/17				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	,				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify Credit Card	<u> </u>				
4.0	•		0000	40.00			
4.6	Amex Nonpriority Creditor's Name	Last 4 digits of account number	9693	\$0.00			
	Correspondence/Bankruptcy		Opened 07/04 Last Active				
	Po Box 981540	When was the debt incurred?	6/17/16				
	El Paso, TX 79998						
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	•					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community		☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa					
	_	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	■ No						
	Yes	Other. Specify Credit Card					

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.7 \$13,415.00 **Bank of America** Last 4 digits of account number 0503 Nonpriority Creditor's Name 4909 Savarese Circle Opened 09/14 Last Active FI1-908-01-50 When was the debt incurred? 1/02/20 Tampa, FL 33634 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.8 **Bank of America** Last 4 digits of account number 4093 \$0.00 Nonpriority Creditor's Name 4909 Savarese Circle Opened 07/15 Last Active FI1-908-01-50 When was the debt incurred? 9/13/16 Tampa, FL 33634 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.9 \$0.00 **Bank of America** Last 4 digits of account number 3582 Nonpriority Creditor's Name

1909 Savarese Circle		Opened 10/14 Last Active		
FI1-908-01-50	When was the debt incurred?	11/21/16		
Гатра, FL 33634				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
☐ Check if this claim is for a community	☐ Student loans			
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	Debts to pension or profit-shari	ing plans, and other similar debts		
☐ Yes	Other. Specify Credit Car	d		

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.1 **Bank of America** 8806 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 4909 Savarese Circle Opened 01/07 Last Active FI1-908-01-50 When was the debt incurred? 8/04/10 Tampa, FL 33634 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Check Credit Or Line Of Credit ☐ Yes 4.1 **Barclays Bank Delaware** 1247 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/12 Last Active Po Box 8801 When was the debt incurred? 5/08/12 Wilmington, DE 19899 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Barclays Bank Delaware** 0005 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/14 Last Active Po Box 8801 When was the debt incurred? 2/09/16 Wilmington, DE 19899 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

debt

■ No

☐ Yes

Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

■ Other. Specify Credit Card

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Unliquidated

☐ Student loans

report as priority claims

☐ Disputed

Debtor 1 Khaled N Nasr Case number (if known)

Bmw Financial Services	Last 4 digits of account number	9731	\$0.00	
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016	When was the debt incurred?	Opened 06/15 Last Active 4/29/17		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	'	Disputed		
☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	Other. Specify Lease			
1 Capital One	Last 4 digits of account number	5102	\$15,150.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 08/16 Last Active 12/21/19		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	■ Other. Specify Charge Account			
Capital One	Last 4 digits of account number	6942	\$0.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/02/09 Last Active 8/24/10		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
□Yes	■ Other. Specify Credit Card			

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.1 Capital One 1636 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/07/12 Last Active Po Box 30285 When was the debt incurred? 5/09/13 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Capital One 6259 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/17 Last Active When was the debt incurred? Po Box 30285 01/20 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

4.1 8 ☐ Yes

3002 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6026 MailCode IL1-0054 Chicago, IL 60680-6026 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

■ Other. Specify Charge Account

\$55,628.61

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.1 **Chase Auto Finance** 0574 \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/09 Last Active Po Box 901076 When was the debt incurred? 11/24/10 Fort Worth, TX 76101 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile ☐ Yes 4.2 **Chase Card Services** 9283 \$15,931.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/16 Last Active 12/14/19 Po Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 Chase Card Services Last 4 digits of account number 3233 \$11,200.00

	Last + digits of accoun	iit iiuiiibci		
Nonpriority Creditor's Name				
Attn: Bankruptcy			Opened 04/16	Last Active
Po Box 15298	When was the debt in	curred?	1/05/20	
Wilmington, DE 19850				
Number Street City State Zip Code	As of the date you file	, the claim is	: Check all that appl	y
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY	Y unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising of	out of a separ	ation agreement or d	ivorce that you did not
s the claim subject to offset?	report as priority claims		.	, ,
No	Debts to pension or	profit-sharing	plans, and other sin	nilar debts
□ Yes	■ Other. Specify Cr	edit Card		

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.2 **Chase Card Services** 2333 \$429.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 01/19 Last Active Attn: Bankruptcy Po Box 15298 When was the debt incurred? 1/01/20 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 **Chase Card Services** 6671 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/16 Last Active Po Box 15298 When was the debt incurred? 6/28/16 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 **Chase Card Services** 6810 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/08 Last Active Attn: Bankruptcy Po Box 15298 When was the debt incurred? 5/17/15 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only

debt

■ No

☐ Yes

■ Other. Specify Credit Card

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Disputed

☐ Student loans

report as priority claims

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.2 **Chase Card Services** 5334 \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 08/10 Last Active Attn: Bankruptcy Po Box 15298 When was the debt incurred? 8/04/13 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 **Chase Card Services** 9136 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/15 Last Active Po Box 15298 When was the debt incurred? 4/03/16 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 **Chase Card Services** 6861 \$18,224.09 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only

debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

Guarnator gor Core Basics Physicial

☐ Debts to pension or profit-sharing plans, and other similar debts

Therapy, PC

Disputed

☐ Student loans

Other. Specify

report as priority claims

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Debtor 1 Khaled N Nasr		Case number (if known)		
4.2	Chase Card Services	Last 4 digits of account number	1196	\$17,589.94
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?		
	Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
		report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	No	, ,		
	Yes	■ Other. Specify Guarantor	for Men's Physical Therpay	
4.2 9	Citibank	Last 4 digits of account number	7257	\$17,916.00
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034	When was the debt incurred?	Opened 09/17 Last Active 1/01/20	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONF		d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	a plans, and other similar debts	
	■ No □ Yes	Other. Specify Credit Card	,	
4.3 0	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	5644	\$0.00
	Citicorp Credit Srvs/Centralized Bk dept Po Box 790034	When was the debt incurred?	Opened 6/22/15 Last Active 10/21/15	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ Disputed				
	☐ At least one of the debtors and another	nmunity Student loans Obligations arising out of a separation agreement or divorce that you did not		
	☐ Check if this claim is for a community			
	debt			
Is the claim subject to offset? report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit Card		

Debtor 1 Khaled N Nasr Case number (if known)

Citibank/The Home Depot	Last 4 digits of account number	4884	\$0.00
Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034	When was the debt incurred?	Opened 11/14 Last Active 1/22/19	
St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Comenitybank/Jared	Last 4 digits of account number	1966	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182273	When was the debt incurred?	Opened 03/16 Last Active 3/25/17	
Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans	<u> </u>	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Costco Anywhere Visa Card	Last 4 digits of account number	3421	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6500	When was the debt incurred?	Opened 7/25/08 Last Active 7/22/16	
Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes			
⊔ res	■ Other Specify Credit Card		

8/03/20 4:54PM Case number (if known) Debtor 1 Khaled N Nasr **Deptartment Store National** 4.3 0480 \$0.00 4 Bank/Macy's Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/15/11 Last Active 9111 Duke Boulevard When was the debt incurred? 1/07/12 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Charge Account ☐ Yes 4.3 **Discover Financial** 8628 \$7,756.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 04/12 Last Active Po Box 15316 When was the debt incurred? 1/01/20 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Discover Financial** 3413 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name **Attn: Bankruptcy Department** Opened 02/16 Last Active Po Box 15316 When was the debt incurred? 01/17 Wilmington, DE 19850

Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

 \square At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?

☐ Student loans \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card

☐ Yes

■ No

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.3 Hackensack Meridian Health 5508 \$9,445.64 Last 4 digits of account number Nonpriority Creditor's Name PO Box 8505 When was the debt incurred? 9/19/2019 Pompano Beach, FL 33075 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services** Other. Specify 4.3 **Hsbc Bank** 5347 Last 4 digits of account number \$0.00 8 Nonpriority Creditor's Name Opened 06/08 Last Active Attn: Bankruptcy Po Box 2013 When was the debt incurred? 1/31/09 Buffalo, NY 14240 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 Mercedes-Benz Financial Services 8001 \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 6/10/15 Last Active Attn: Bankruptcy Dept Po Box 685 When was the debt incurred? 8/21/18 Roanoke, TX 76262 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

■ Other. Specify Auto Lease

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.4 **Mercedes-Benz Financial Services** 4001 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 10/13 Last Active Attn: Bankruptcy Dept Po Box 685 When was the debt incurred? 11/25/16 Roanoke, TX 76262 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Lease **NEw Jersey Healthcare Specialists,** 4.4 7758 \$1,494,00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 412138 When was the debt incurred? 10/19 Boston, MA 02241-2138 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Services** Other. Specify 4.4 New Jersey Urology, LLC \$3,640.00 1780 Last 4 digits of account number Nonpriority Creditor's Name 1515 Broad Street When was the debt incurred? 9/19 Suite B130 Bloomfield, NJ 07003-3002 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

■ Other. Specify Medical Services

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) Nissan Motor Acceptance 4.4 2782 \$0.00 3 Corp/Infiniti Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/12 Last Active When was the debt incurred? Po Box 660360 12/20/13 Dallas, TX 75266 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify Lease **Nissan Motor Acceptance** 4.4 5697 \$0.00 Corp/Infiniti Last 4 digits of account number Nonpriority Creditor's Name Opened 03/12 Last Active Attn: Bankruptcy Po Box 660360 When was the debt incurred? 8/07/15 Dallas, TX 75266

Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply
Who incurred the debt? Check one.	
■ Debtor 1 only	☐ Contingent
☐ Debtor 2 only	☐ Unliquidated
☐ Debtor 1 and Debtor 2 only	☐ Disputed
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
☐ Check if this claim is for a community	☐ Student loans
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
No	☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Yes	■ Other. Specify Lease
Nissan Motor Acceptance	

8955 Corp/Infiniti Last 4 digits of account number Nonpriority Creditor's Name Opened 12/09 Last Active Attn: Bankruptcy Po Box 660360 When was the debt incurred? 4/09/12 Dallas, TX 75266 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Lease

\$0.00

Case number (if known) Debtor 1 Khaled N Nasr **Nissan Motor Acceptance** 4.4 8046 \$0.00 6 Corp/Infiniti Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/13 Last Active Po Box 660360 When was the debt incurred? 12/02/15 Dallas, TX 75266 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No Other. Specify Lease ☐ Yes **North Jersey Healthcare** 4.4 \$1,494.00 7758 Specialists, PC Last 4 digits of account number Nonpriority Creditor's Name 9/19 P.O. Box 412138 When was the debt incurred? Boston, MA 02241-2138 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services** Other. Specify **OneWest Bank Mortgage Servicing** 5843 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy, OneWest Bank Opened 5/16/07 Last Active Po Box 7056 When was the debt incurred? 10/16/13 Pasadena, CA 91109 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Real Estate Mortgage ☐ Yes

Debtor 1 Khaled N Nasr Case number (if known)

1.4 9	Paramount Leasehold LP	Last 4 digits of account number	Unknown		
	Nonpriority Creditor's Name 1501 Broadway 19th Floor	When was the debt incurred?			
	Attn: Building Manger New York, NY 10036				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	■ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	□ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	■ Yes	Personal Guranty of Lease for Core Basics PT, PC, and Elmont Rehab			
4.5 O	Petroff Amshen, LLP	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name 1795 Coney Island Avenue 3rd Floor	When was the debt incurred?			
	Brooklyn, NY 11230 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
		Lawsuit Petroof Amshen LLP v Alfa Rehab PT, PC et.al. United States District COurt: Eastern District, NY			
	☐ Yes	Other. Specify Docket 1:19-cv-01861 MKB-RML			

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.5 4627 \$0.00 **PHH Mortgage Services** Last 4 digits of account number Nonpriority Creditor's Name Opened 5/16/07 Last Active Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 When was the debt incurred? 5/01/19 West Palm Beach, FL 33409 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Real Estate Mortgage ☐ Yes

Quest Diagnostics, Inc	Last 4 digits of account number	4872	\$1,300.00
Nonpriority Creditor's Name P.O. Box 7308 Hoffater, MO 65873-7308	When was the debt incurred?	12/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Medical Se	rvices	
Quest Diagnostics, Inc	Last 4 digits of account number	1352	\$667.24
Nonpriority Creditor's Name P.O. Box 7308	When was the debt incurred?		
Hoffater, MO 65873-7308 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	

4.5

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) 4.5 Sterling Jewelers/Jared 0054 \$0.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/16 Last Active 375 Ghent Rd When was the debt incurred? 3/25/17 **Akron, OH 44333** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.5 Synchrony Bank/Lowes 1986 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 7/24/11 Last Active Po Box 965060 When was the debt incurred? 1/15/12 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.5 Synchrony Bank/PayPal Cr 0543 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 04/06 Last Active Attn: Bankruptcy Dept 4/09/09 Po Box 965060 When was the debt incurred? Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another ☐ Check if this claim is for a community

debt

Is the claim subject to offset?

■ No ☐ Yes ☐ Unliquidated

☐ Disputed

☐ Contingent

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Charge Account

Debtor 1 Khaled N Nasr Case number (if known)

4.5 7	Synchrony Bank/TJX	Last 4 digits of account number	9114	\$0.00
<u>·</u>	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 12/11/11 Last Active 1/23/12	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Car	d	
Part	3: List Others to Be Notified About a De	ebt That You Already Listed		
is tr hav	this page only if you have others to be notified rying to collect from you for a debt you owe to s re more than one creditor for any of the debts th ified for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i at you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the collection agency	here. Similarly, if you
	e and Address	On which entry in Part 1 or Part 2 did yo	•	
	rney General ed States Department of Justice		Part 1: Creditors with Priority Unsecured Clair	
Ben P.O.	Franklin Station Box 683	ı	☐ Part 2: Creditors with Nonpriority Unsecured (Claims
Was	shington, DC 20044	Last 4 digits of account number		
Cart	e and Address eer Ledyard & Millbrun, LLP		Part 1: Creditors with Priority Unsecured Clair	
Attn	all Street : Barnara Brown, Esq [,] York, NY 10005		Part 2: Creditors with Nonpriority Unsecured (Claims
		Last 4 digits of account number		
Doy	e and Address le & Hoefs, LLC	On which entry in Part 1 or Part 2 did yo Line 4.2 of (Check one):	u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clair	ms
	3 Springwood Road ८. PA 17403	ı	Part 2: Creditors with Nonpriority Unsecured 0	Claims
1011	A, FA 17405	Last 4 digits of account number	5760	
Doy	e and Address le & Hoefs, LLC	On which entry in Part 1 or Part 2 did yo Line 4.3 of (Check one):	u list the original creditor? ☑ Part 1: Creditors with Priority Unsecured Clair	ms
	3 Springwood Road ५, PA 17403	ı	Part 2: Creditors with Nonpriority Unsecured 0	Claims
1011	A, FA 17405	Last 4 digits of account number	5759	
	e and Address ser Law Group, PLLC	On which entry in Part 1 or Part 2 did yo Line 4.49 of (Check one):	u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clair	me.
	Third Avenue		Part 2: Creditors with Nonpriority Unsecured 0	
	e 1301 [,] York, NY 10017		— Fait 2. Ofediois with Notipholity of secured v	Oldinis
		Last 4 digits of account number		
	e and Address	On which entry in Part 1 or Part 2 did yo		
	amount Leasehold LP Levin managment Corp		Part 1: Creditors with Priority Unsecured Clair	
Attn 975	: Matthew Harding US Highway 22 West nfield, NJ 07060	•	Part 2: Creditors with Nonpriority Unsecured (oiaims
	•	Last 4 digits of account number		

Debtor 1 Khaled N Nasr Case number (if known)

Name and Address Paramount Leasehold, LP c/o Karar Associates Attn: Stanley Garber

One Rockefeller Plaza, Suite 1708

New York, NY 10020

On which entry in Part 1 or Part 2 di	d you list the original creditor?
Line 4.49 of (Check one):	☐ Part 1: Creditors with P

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 9,667.34
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 9,667.34
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 222,295.23
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 222,295.23

Fill in this information to identify your case:					
Khaled N Nasr					
First Name	Middle Name	Last Name			
First Name	Middle Name	Last Name			
kruptcy Court for the:	DISTRICT OF NEW JERSEY				
			☐ Check if this is an		
			amended filing		
	Khaled N Nasr First Name	Khaled N Nasr First Name Middle Name First Name Middle Name	Khaled N Nasr First Name Middle Name Last Name First Name Middle Name Last Name		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 AmeriCredit/GM Financial
Attn: Bankruptcy
Po Box 183853
Arlington, TX 76096

State what the contract or lease is for
Acct# 112015867607
Opened 10/18
Lease

					8/03/20 4:54Pi
Fill in this i	information to identify your	case:			
Debtor 1	Khaled N Nasr				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY		
Case numb	er				
(if known)					☐ Check if this is an
					amended filing
Oα: -: - I	Tames 40011				
	Form 106H	_			
Sched	ule H: Your Cod	ebtors			12/15
Arizona ■ No. 0 □ Yes. 3. In Coluin line: Form 1	2 again as a codebtor only i 06D), Schedule E/F (Official	, Nevada, New Mexico, Pu use, or legal equivalent live cors. Do not include your f that person is a guaran	erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make	nington, and Wisconsin.) r if your spouse is filing sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to file
	lumn 2. Column 1: Your codebtor			Column 2: The cree	ditor to whom you owe the debt
	ame, Number, Street, City, State and Z	IP Code		Check all schedules	
2.4				Польта в	
3.1	lame			☐ Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
_				Scriedule G, line	
	lumber Street City	State	ZIP Code		
	oity	State	ZIF Code		
22				Cohodulo D. lina	
3.2	lame			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule E/F, III	
	hard or				, <u> </u>
	lumber Street City	State	ZIP Code		
	····y				

Fill in this informa	ation to identify your case:	
Debtor 1	Khaled N Nasr	
Debtor 2 (Spouse, if filing)		
United States Bar	nkruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	orm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	F	■ Employed	☐ Employed
	attach a separate page with information about additional employers.	Employment status	☐ Not employed	■ Not employed
		Occupation	Physical Therapist	Homemaker
	Include part-time, seasonal, or self-employed work.	Employer's name	Afiniti, Inc	
	Occupation may include student or homemaker, if it applies.	Employer's address	1701 Pennsylvania Avenue NW Washington, DC 20006	
		How long employed the	nere? 5 months	- -

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-filling spouse			
2.	\$	16,666.67	\$	0.00		
3.	+\$_	0.00	+\$	0.00		
4.	\$	16,666.67	\$	0.00		

For Debtor 2 or

For Debtor 1

Debtor 1 Khaled N Nasr Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 16,666.67 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 4,169.10 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 5e. Insurance 5e. 726.42 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 **Union dues** 5g. 5g. \$ 0.00 0.00 5h. Other deductions. Specify: NJ Disability 5h.+ \$ \$ 0.00 43.33 NJ Family Leave Ins \$ 26.67 \$ 0.00 **Health Savings** \$ 98.48 0.00 Life and AD&D (EE and Spouse) \$ 102.59 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 6. \$ 5,166.59 \$ 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 11,500.08 0.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross 9. 10. 11.

	monthly net income.	ousiness expenses, and the total	8a.	\$	0.00	\$	0.00	
8b.	Interest and dividends		8b.	\$	0.00	\$	0.00	
8c.	regularly receive	ou, a non-filing spouse, or a dependen child support, maintenance, divorce nt.	t 8c.	\$	0.00	\$	0.00	
8d.	Unemployment compensation		8d.	\$	0.00	\$	0.00	
8e.	Social Security		8e.	\$	0.00	\$_	0.00	
8f.		alue (if known) of any non-cash assistanc mps (benefits under the Supplemental	e 8f.	\$	0.00	\$	0.00	
8g.	Pension or retirement income		8g.	\$	0.00	\$	0.00	
8h.	Other monthly income. Specify:	Expense Reimbursement (Varies Monthly)	8h.+	+ \$	765.74	+ \$	0.00	
Add	all other income. Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	\$	765.74	\$_	0.00	
	ulate monthly income. Add line 7 he entries in line 10 for Debtor 1 an		10. \$	12,	265.82 + \$_		0.00 = \$ _1	2,265.82
Inclu- other	de contributions from an unmarried friends or relatives. of include any amounts already inclu	the expenses that you list in Schedule partner, members of your household, you uded in lines 2-10 or amounts that are not	r depen				Schedule J. 11. +\$	0.00
	that amount on the Summary of Sc	line 10 to the amount in line 11. The re chedules and Statistical Summary of Certa						2,265.82
Do y	ou expect an increase or decreas No.	e within the year after you file this forn	1?				Combine monthly	
$\overline{\Box}$	Yes. Explain:							
_								

12.

13.

Debtor 1 Khaled N Nasr Debtor 2 (Spouse, if filing)	Filli	n this informa	tion to identify yo	our case:							
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY Official Form 106J Schedule J: Your Expenses 127 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part : Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Dees Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents? Do not state the dependents names. Daughter 11 Yes Son 14 Yes Son 14 Yes No No Spouse 42 Yes No No Spouse 42 Yes No No Spouse 3. Do your expenses include expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income	Debt	tor 1	Khaled N Na	sr			Ch	eck if th	nis is:		
Official Form 106J Schedule J: Your Expenses 12/ Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No on the complete in a separate household? No on thist Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter 11							_	A su	oplement show		er
Official Form 106J Schedule J: Your Expenses 12/ Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No on the complete in a separate household? No on thist Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter 11	Unite	ed States Bankr	uptcy Court for the	DISTRI	CT OF NEW JERSEY			MM /	DD / YYYY		
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.			uptoy Court for the	. DIOTINI	OT OT NEW CENCET			1011017	5571111		
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:	1										
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part !				_							
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (iff known). Answer every question. Part 1:						Cura da sada a la	- (1				2/1
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent's relationship to Debtor 1 or Debtor 2 age Do not state the dependents names. Daughter 11 Yes. Son 14 Yes. Son 14 Yes. No Spouse 42 Yes. No Yes. No Yes. Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income	info	rmation. If m	ore space is ne	eded, atta	ch another sheet to this						
Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents?				hold							
No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents?				n a separa	ate household?						
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter Daughter Daughter Do not state the dependents names. Daughter Daughter Do not state the dependents names. Daughter Daughter Do not state the dependents names. Daughter Do not state the dependents names. Son Do your expenses include expenses of people other than yourself and your dependents? Do your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income		□ No	0			s for Separate House	ehold of De	ebtor 2.			
Debtor 2. Do not state the dependents names. Daughter Daughter 11 Yes No No Son 14 Yes No No Spouse 42 Yes No No Yes No No Yes No No Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income	2.	Do you have	e dependents?	□ No							
dependents names. Daughter 11 Yes No Son 14 Yes No Spouse 42 Yes No No No Spouse 42 Yes No No Yes No No Yes No Yes No Yes No Yes No No Yes No Yes No Yes No No Yes No Yes No Yes No Yes No Yes No No Yes No No Yes No No Yes No Yes No Yes No Yes No No Yes No No Yes No No Yes No Yes No No Yes No No Yes No Yes No Yes No No Yes No No Yes			ebtor 1 and	_					•		
Son 14						Daughter		1	1		
Spouse Spouse 42 Yes No No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income											
Spouse Spouse 42 Yes No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income						5 0n			4		
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i>						Spouse		4	2		
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i>											
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i>	3.	expenses of	f people other tl	han 👝						Li Tes	
the value of such assistance and have included it on Schedule I: Your Income	Esti exp	imate your ex enses as of a	penses as of yo	our bankrı	uptcy filing date unless y						
	the	value of such	n assistance and						Your expe	enses	
 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 2,236.25 	4.					nclude first mortgag	e 4.	\$		2,236.25	
If not included in line 4:		If not includ	ed in line 4:								
4a. Real estate taxes 4a. \$ 364.12		4a. Real e	state taxes				4a.	\$		364.12	
4b. Property, homeowner's, or renter's insurance 4b. \$ 108.33		4b. Proper	rty, homeowner's				4b.	\$			
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 300.00											
4d. Homeowner's association or condominium dues 4d. \$ 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 364.00	5.					me equity loans					

Debtor	1 Khaled N Nasr	Case numl	ber (if known)	
6. U t	ilities:			
6a	a. Electricity, heat, natural gas	6a.	\$	622.00
6b	o. Water, sewer, garbage collection	6b.	\$	75.00
60	:. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	400.00
60	I. Other. Specify:	6d.	\$	0.00
. Fo	ood and housekeeping supplies	7.	\$	940.00
	nildcare and children's education costs	8.	\$	120.00
_	othing, laundry, and dry cleaning	9.	·	80.00
	ersonal care products and services	10.	\$	100.00
	edical and dental expenses	11.	·	800.00
	ansportation. Include gas, maintenance, bus or train fare.		Ψ	000.00
	o not include car payments.	12.	\$	650.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	naritable contributions and religious donations	14.	·	250.00
	surance.		–	230.00
-	o not include insurance deducted from your pay or included in lines 4 or 20.			
	ia. Life insurance	15a.	\$	330.00
	ib. Health insurance	15b.	·	0.00
	ic. Vehicle insurance	15c.	·	348.40
	id. Other insurance. Specify: Pet Insurance	15d.	·	100.00
	IXES. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	100.00
Sp	pecify:	16.	\$	0.00
	stallment or lease payments:	4-	•	
	/a. Car payments for Vehicle 1	17a.	•	613.63
	b. Car payments for Vehicle 2	17b.	·	653.46
	c. Other. Specify:	17c.		0.00
17	'd. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	ther payments you make to support others who do not live with you.		\$	750.00
Sp	pecify: Sister lives in Cairo	19.		
	Brother (low income)	19.		
.0. O 1	ther real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	ur Income.	
	Da. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	od. Maintenance, repair, and upkeep expenses	20d.		0.00
	e. Homeowner's association or condominium dues	20e.		0.00
			*	
	ther: Specify: Continuing Education	21.	+\$	300.00
	alculate your monthly expenses		e e	10.605.10
	2a. Add lines 4 through 21.		\$	10,605.19
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	10,605.19
3. C:	alculate your monthly net income.			
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	12,265.82
	Bb. Copy your monthly expenses from line 22c above.	23b.		10,605.19
20	Decrete the monthly expenses from the 220 above.	200.	Ψ	10,005.19
23	sc. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	1,660.63
Fo	by you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you odification to the terms of your mortgage? No.			rease or decrease because of a
	Yes. Explain here:			
	Tes. Lapiaii liele.			

Fill in this info	rmation to identify your	case:			
Debtor 1	Khaled N Nasr				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
Case number (if known)					☐ Check if this is an amended filing
Official For Declara		n Individual I	Debtor's Sch	nedules	12/15
If two married p	people are filing together	, both are equally respons	sible for supplying corre	ect information.	
obtaining mone years, or both.	nis form whenever you fi ey or property by fraud ir 18 U.S.C. §§ 152, 1341, 1 gn Below		or amended schedules. Nuptcy case can result in	Making a false statemen fines up to \$250,000, or	t, concealing property, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attorne	ey to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare retrue and correct.	that I have read the summ	ary and schedules filed	with this declaration an	d
X /s/ Kh	aled N Nasr		X		
Khale	ed N Nasr ure of Debtor 1		Signature of D	ebtor 2	
Date	August 3, 2020		Date		

Fill in th	is inform	ation to identify your	case:			
Debtor 1		Khaled N Nasr				
		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		First Name	Middle Name	Last Name		
United S	tates Ban	kruptcy Court for the:	DISTRICT OF NEW JER	SEY		
Case nui	mhar					
(if known)					_	Check if this is an amended filing
Officia	al For	<u>m 107</u>				
State	ment	of Financial	Affairs for Indivi	duals Filing for	Bankruptcy	4/19
informati	ion. If mo (if known	ore space is needed,). Answer every ques	attach a separate sheet to	this form. On the top of a	e equally responsible for su ny additional pages, write yo	
1. Wha	at is your	current marital statu	s?			
	Married Not marr	ied				
2. Duri	ing the la	st 3 years, have you	lived anywhere other than	where you live now?		
■	No Yes. List	all of the places you li	ved in the last 3 years. Do n	ot include where you live no	ow.	
Dek	otor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	Address:	Dates Debtor 2 lived there
					unity property state or territor Rico, Texas, Washington and V	
	No					
	Yes. Mal	ke sure you fill out Sch	edule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explair	the Sources of You	Income			
Fill in	n the total	amount of income you	uployment or from operating a received from all jobs and a have income that you received.	all businesses, including pa		endar years?
	No					
	Yes. Fill	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	calendar y 1 to Dec	year: cember 31, 2019)	■ Wages, commissions, bonuses, tips	\$2,954.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1 Khaled N Nasr Case number (if known)

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply	
		ndar year be December		■ Wages, commissions, bonuses, tips	\$82,293.00	☐ Wages, commiss bonuses, tips	sions,
				☐ Operating a business		☐ Operating a busi	ness
	or the caler anuary 1 to	ndar year: December	31, 2017)	■ Wages, commissions, bonuses, tips	\$16,374.00	☐ Wages, commiss bonuses, tips	sions,
				☐ Operating a business		☐ Operating a busi	ness
	and other winnings. List each No	public bene If you are fil	fit payments; ing a joint ca the gross inc		rest; dividends; money collect you received together, list it to	cted from lawsuits; roya only once under Debtor	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6.	Are eithe ☐ No.	Neither D individual	ebtor 1 nor I primarily for a	e's debts primarily consume Debtor 2 has primarily consume a personal, family, or househoure you filed for bankruptcy, di	umer debts. Consumer debt Id purpose."		s.C. § 101(8) as "incurred by an
		□ No.	Go to line				
		☐ Yes	paid that ci	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support obliq	, ,	,
		* Subject	to adjustmer	t on 4/01/22 and every 3 year	s after that for cases filed on	or after the date of adj	ustment.
	Yes			or both have primarily consu ore you filed for bankruptcy, di		al of \$600 or more?	
		■ No.	Go to line	7.			
		□ Yes	include pay	each creditor to whom you pai /ments for domestic support o r this bankruptcy case.			paid that creditor. Do not , do not include payments to an
	Credito	r's Name an	d Address	Dates of payme	nt Total amount	Amount you W	as this payment for

8/03/20 4:54PM Debtor 1 Khaled N Nasr Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions

Address: Official Form 107

per person

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Describe the gifts

Value

Dates you gave

the gifts

Yes. Fill in the details for each gift. Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Address

Description and value of

property transferred

Person's relationship to you

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

8/03/20 4:54PM

Debtor 1 Khaled N Nasr Case number (if known)

 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. 					of which you are a		
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and S	torage Uni	ts		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	were any financial ac	counts or inst	ruments he	eld in your name, or for y	our benefit, closed,	
	Include checking, savings, money market, or houses, pension funds, cooperatives, associated No		•	•	it; shares in banks, cred	it unions, brokerage	
	Yes. Fill in the details.						
		Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, a	iny safe de	posit box or other depos	sitory for securities,	
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	■ No						
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control fo	,					
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
Par	t 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	-	environmental	law, wheth	ner you now own, operat	e, or utilize it or used	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, o		as a hazardou	s waste, ha	azardous substance, tox	ic substance,	
Dan	ort all notices releases and precedings that	vou know about roga	rdless of who	n thoy occ	urrad		

8/03/20 4:54PM

Debtor 1 Khaled N Nasr Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environ No								
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		onmental law, if you it	Date of notice			
25.	Have you notified any governmental unit of a	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	_	onmental law, if you it	Date of notice			
26.	Have you been a party in any judicial or adm	inistrative proceeding under any en	vironmental	law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case			
Par	11: Give Details About Your Business or C	Connections to Any Business						
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have a	any of the fol	llowing connections to any	business?			
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity	y, either full-	time or part-time				
	■ A member of a limited liability compa	any (LLC) or limited liability partners	hip (LLP)					
	☐ A partner in a partnership							
	■ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	☐ No. None of the above applies. Go to Pa	art 12.						
	Yes. Check all that apply above and fill i	in the details below for each busine	ss.					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Do n	loyer Identification number ot include Social Security				
		·		Dates business existed				
	Onsite Rehab & Fitness, LLC 1368 Acedmy Lane	Physical Therapy	EIN:	NJ 0400237341				
	Teaneck, NJ 07666	Kevin Leeds, CPA 255 West Spring Valley Avenue Suite 207 Maywood, New Jersey 07607	From ,	n-To 2008-2/2020				
	Core Basics PT, PC	Physical Therapy	EIN:	46-3670307				
	1501 Broadway Suite 1311 New York, NY 10036	Kevin Leeds, CPA 255 West Spring Valley Avenue Suite 207 Maywood, New Jersey 07607	From,	n-To 9/2013 - February :	2020			

Case number (if known) Debtor 1 Khaled N Nasr

	Business Name Address (Number Street City State and ZIR Code)	Describe the nature of the business		Identification number clude Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates bus	siness existed
	Men's Physical Therapy LLC 255 W. Spring Valley Avenue	Physical Therapy	EIN:	Nj Cert 0400725277
	Maywood, NJ 07607	Kevin Leeds, CPA 255 West Spring Valley Avenue, Suite 207 Maywood, New Jersey 07607	From-To	2/2015 - 2/2020
	Afiniti Physial Therapy & Wellness,	Physical Therapy	EIN:	84-3246538
	1368 Academy Lane Teaneck, NJ 07666	Kevin Leeds, CPA 255 West Spring Valley Avenue, Suite 207 Maywood, New Jersey 07607	From-To	OCtober 2019 - Present
	Core Basics Physical Therapy, LLC	Physicial Therapy	EIN:	
	255 W Spring Valley Avenue Maywood, NJ 07607	Kevin Leeds, CPA 255 West Spring Valley Avenue, Suite 207 Maywood, New Jersey 07607	From-To	6/2013- 2/2020
	 institutions, creditors, or other parties. No Yes. Fill in the details below. 			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Par	t 12: Sign Below			
are to with 18 U	we read the answers on this <i>Statement of Fin</i> true and correct. I understand that making a a bankruptcy case can result in fines up to I.S.C. §§ 152, 1341, 1519, and 3571. Khaled N Nasr	false statement, concealing property, or o \$250,000, or imprisonment for up to 20 year	btaining mo	oney or property by fraud in connection
	aled N Nasr nature of Debtor 1	Signature of Debtor 2		
Dat	e August 3, 2020	Date		
Did ■ N		ent of Financial Affairs for Individuals Filin	g for Bankri	uptcy (Official Form 107)?
_	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptc	y forms?	
■ N	io es. Name of Person Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration, a	and Signatur	e (Official Form 119).

Fill in this information to identify your case:				
Debtor 1	Khaled N Nasr			
Debtor 2 (Spouse, if filing)				
United States B	Sankruptcy Court for the: District of New Jersey			
Case number (if known)				

	Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
1. Disposable income is not determined un 11 U.S.C. § 1325(b)(3).						
		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
3. The commitment period is 3 years.		3. The commitment period is 3 years.				
	4. The commitment period is 5 years.					
	☐ Check if this is an amended filing					

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 2 or Debtor 1 non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 14,923.07 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Khaled N Nasr Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 14,923.07 14.923.07 0.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 14,923.07 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Total 14,923.07 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=>

14,923.07

Debtor 1	Khaled N Nasr	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	1	x 12
15k	. The result is your current monthly income for the year for this part of t	ne form	\$179,076.84

16	. Calcul	ate the median family income that applies to yo	ou. Follow these steps:			
	16a. Fi	Il in the state in which you live.	NJ			
	16b. Fi	Il in the number of people in your household.	4			
		ll in the median family income for your state and si			\$	131,331.00
		o find a list of applicable median income amounts, structions for this form. This list may also be availa				
17		o the lines compare?	• ,			
	17a.	☐ Line 15b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO				
	17b.	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 ab	ation of Your Disposabl			
Par	t 3:	Calculate Your Commitment Period Under 11 U	l.S.C. § 1325(b)(4)			
18.	Соруу	our total average monthly income from line 11	•		\$	14,923.07
19.	conten	t the marital adjustment if it applies. If you are r d that calculating the commitment period under 11 s's income, copy the amount from line 13.				
	19a. If	the marital adjustment does not apply, fill in 0 on li	ne 19a.		-\$	0.00
	19b. S ı	ubtract line 19a from line 18.			\$	14,923.07
20.	Calcul	ate your current monthly income for the year.	Follow these steps:			
	20a. C	opy line 19b			\$	14,923.07
	М	ultiply by 12 (the number of months in a year).			X	12
	20b. Tł	ne result is your current monthly income for the ye	ar for this part of the form		\$_	179,076.84
	20c. C	opy the median family income for your state and s	ize of household from line	9 16c	\$	131,331.00
	21. H	ow do the lines compare?				
		Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	e ordered by the court, on	the top of page 1 of this form, ch	eck box 3, 7	he commitment
		Line 20b is more than or equal to line 20c. Unlocommitment period is 5 years. Go to Part 4.	ess otherwise ordered by	the court, on the top of page 1 of	this form, ch	eck box 4, The
Par	t 4:	Sign Below				
	By sign	ning here, under penalty of perjury I declare that th	e information on this state	ement and in any attachments is t	rue and corr	ect.
)		haled N Nasr				
		ed N Nasr ture of Debtor 1				
	Date _	August 3, 2020				
		MM / DD / YYYY shecked 17a, do NOT fill out or file Form 122C-2.				
	•	checked 17b, fill out Form 122C-2 and file it with the	is form. On line 39 of that	form convivour current monthly	income from	line 14 above

Fill in this in	nformation to identify your case	e:		
Debtor 1	Khaled N Nasr			
Debtor 2 (Spouse, if fi	iling)			
United State	s Bankruptcy Court for the: Distr	ict of New Jersey		
Case numbe	er		☐ Check	if this is an amended filing
Official Form		Your Disposable I	ncome	04/1
	is form, you will need your comp t Period (Official Form 122C-1).	oleted copy of Chapter 13 Stateme	ent of Your Current Monthly	Income and Calculation of
space is nee additional pa		this form, Include the line number number (if known).		onsible for being accurate. If more ation applies. On the top any
the quest		S standards, go online using the l		Use these amounts to answer the e instructions for this form. This
expenses	if they are higher than the standar	6-15 regardless of your actual expe ds. Do not include any operating ex at you subtracted from your spouse's	penses that you subtracted from	om income in lines 5 and 6 of Form
If your exp	penses differ from month to month,	enter the average expense.		
Note: Line	e numbers 1-4 are not used in this	form. These numbers apply to inform	nation required by a similar fo	rm used in chapter 7 cases.
Fill ir plus	n the number of people who could	mining your deductions from inco oe claimed as exemptions on your fo ndents whom you support. This num d.	ederal income tax return,	4
National	Standards You must use	the IRS National Standards to answ	ver the questions in lines 6-7.	
1				

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,740.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age			
7a. Out-of-pocket health care allowance per person	\$	56	
7b. Number of people who are under 65	X	4	
7c. Subtotal. Multiply line 7a by line 7b.	\$	224.00	Copy here=> \$224.00
People who are 65 years of age or older			
7d. Out-of-pocket health care allowance per person	\$	125	
7e. Number of people who are 65 or older	X	0	
7f. Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=> \$ 0.00
7g. Total. Add line 7c and line 7f		\$	224.00 Copy total here=> \$224.00

Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

779.00

- Housing and utilities Mortgage or rent expenses:
 - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

3,084.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average paymen	monthly					
Bank of America	\$	364.12					
PHH Mortgage Servicing	\$	2,236.25					
9b. Total average monthly payment	\$	2,600.37	Copy here=>	-\$	2,600.37	Repeat th on line 33	
Net mortgage or rent expense.							
Subtract line 9b (total average monthly payment) fro		rtgage	\$	483.63	Copy here=>	• \$	483.6

or rent expense). It this number is less than \$0, enter \$0.

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

9c.

11.	11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.						
	☐ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the <i>Operating Costs</i> that apply for your Census region or metropolitan statistical area. \$						
13.	3. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.						
Ve	hicle 1 Describe Vehicle 1: 2018 Alfa Romeo Ste Lane, Teaneck NJ 07		ion: 1368 Academy				
13a.	Ownership or leasing costs using IRS Local Standard		\$ 521.00	-			
13b.	. Average monthly payment for all debts secured by Vehicle Do not include costs for leased vehicles.	e 1.		-			
	To calculate the average monthly payment here and on lir are contractually due to each secured creditor in the 60 m bankruptcy. Then divide by 60.		at				
	Name of each creditor for Vehicle 1	Average monthly payment					
	Bank of America	\$ 603.40					
	Total Average Monthly Payment	\$603.40	Copy here => -\$ 6	Repeat this amount on line 33b.			
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than	\$0, enter \$0	\$0.00	Copy net Vehicle 1 expense here => \$ _	0.00		
Ve	hicle 2 Describe Vehicle 2: Volvo XC (leased) 1368 Academy Lane	, Teaneck, NJ 07666					
13d.	. Ownership or leasing costs using IRS Local Standard		\$ 521.00	_			
13e.	. Average monthly payment for all debts secured by Vehicle leased vehicles.	e 2. Do not include costs fo	or				
	Name of each creditor for Vehicle 2	Average monthly payment					
	-NONE-	\$\$					
	Total average monthly payment	\$	Copy here => -\$0	Repeat this amount on line 33c.			
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than	\$0, enter \$0	\$ \$ 521.00	Copy net Vehicle 2 expense here => \$	521.00		
14.	Public transportation expense: If you claimed 0 vehicl Public Transportation expense allowance regardless			 in the \$	0.00		
15.	Additional public transportation expense: If you claime also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Tra</i>	n what you believe is the a	e 11 and if you claim tha appropriate expense, but	t you may you may \$	0.00		

Oth		In addition to the expense de the following IRS categories		s listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, soci	al security taxes, and Medica wever, if you expect to recei om the total monthly amount	are taxes	s. You may ind refund, you m	nd local taxes, such as income taxes, clude the monthly amount withheld from the third that the expected refund by 12 for taxes.	\$	3,064.80
17	Involuntary deductions: The	·	ictions tl	act vour ich ro	quiros, such as ratirament	· —	
17.	contributions, union dues, a		ictions ti	iat your job re	quires, such as remement		
	Do not include amounts that	are not required by your job	, such a	s voluntary 40	11(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.				ırance.	\$	330.00
19.	Court-ordered payments:				by the order of a court or		
	administrative agency, such Do not include payments on		-		You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	ly amount that you pay for e	ducation	that is either	required:		
	as a condition for your jo	b, or					
	for your physically or me	ntally challenged dependent	child if r	no public educ	ation is available for similar services.	\$	300.00
21				•	sitting, daycare, nursery, and preschool.		
				-	sking, dayoaro, naroory, and proconcon	\$	0.00
22.	Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.						
	Payments for health insuran	ce or health savings accoun	ts shoul	d be listed only	y in line 25.	\$	576.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					+\$	250.00
24.	Add all of the expenses all Add lines 6 through 23.	lowed under the IRS exper	nse allo	wances.		\$	8,906.43
Add	litional Expense Deduction	These are additional de Note: Do not include ar					
25.							
	insurance, disability insuran your dependents.				nses. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
						r	
	your dependents.		unts that	are reasonab		r	
	your dependents. Health insurance	ce, and health savings acco	unts that	are reasonab		г	
	your dependents. Health insurance Disability insurance	ce, and health savings acco	ss	671.00 134.70		r \$	896.60
	your dependents. Health insurance Disability insurance Health savings account	ce, and health savings according to the saving	\$ \$ • \$	671.00 134.70 90.90	oly necessary for yourself, your spouse, or		896.60
	your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	ce, and health savings according to the saving	\$ \$ • \$	671.00 134.70 90.90	oly necessary for yourself, your spouse, or		896.60
26.	your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you Yes Continued contributions to continue to pay for the reason	tal amount? to the care of household or onable and necessary care a of your immediate family who	\$ \$ \$ and suppo ois unab	671.00 134.70 90.90 896.60 members. The ort of an elder ole to pay for s	Copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may		896.60
	your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you Yes Continued contributions to continue to pay for the reason your household or member of include contributions to an ail.	the care of household or onable and necessary care a of your immediate family who count of a qualified ABLE priolence. The reasonably ne	\$ \$ \$ \$ and suppo is unaborogram.	671.00 134.70 90.90 896.60 members. The ort of an elder ole to pay for s 26 U.S.C. § 5 monthly expe	Copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	\$	

Debtor 1	Khaled N Nasr	Case	e number (if known)			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	and operating expenses on			
	If you believe that you have home energy of 8, then fill in the excess amount of home en	osts that are more than the home energy cost ergy costs	s included in expenses on line	Э		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must s ry.	show that the additional	\$_	0.00	
		ren who are younger than 18. The monthly pendent children who are younger than 18 ye				
	You must give your case trustee document claimed is reasonable and necessary and i	ation of your actual expenses, and you must e ot already accounted for in lines 6-23.	explain why the amount			
	* Subject to adjustment on 4/01/22, and ev	ery 3 years after that for cases begun on or aft	ter the date of adjustment.	\$	300.00	
	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.					
	You must show that the additional amount	claimed is reasonable and necessary.		\$_	0.00	
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	the form of cash or financial			
	Do not include any amount more than 15%	of your gross monthly income.		\$_	250.00	
	Add all of the additional expense deduc Add lines 25 through 31.	ions.		\$	1,446.60	
Dedu	uctions for Debt Payment					
	or debts that are secured by an interest pans, and other secured debt, fill in lines	n property that you own, including home r 33a through 33e.	mortgages, vehicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually duenkruptcy. Then divide by 60.	e to each secured			
	Mortgages on your home			Averag	ge monthly	
33a.	Copy line 9b here		=>	\$	2,600.37	
	Loans on your first two vehicles					
33b.			=>	\$	603.40	
33c.				\$	0.00	
33d.	List other secured debts:					
	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?			
			□ No			
	-NONE-		☐ Yes	\$		
			□ No			
			☐ Yes	\$		
				· —		
			□ No			
			☐ Yes +	\$		
33e	Total average monthly payment. Add lines	33a through 33d	\$\$Copy total here:	_	3,203.77	

	debts that you listed in lin r property necessary for yo				e,					
■ No.	Go to line 35.									
☐ Yes	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ossession of your property (c								
Name of th	e creditor	Identify property that secu	res the	debt	To	otal cure amount			onthly	cure
-NONE-				\$;		÷ 60 =			
					_		Co	- -		
				Total	\$	0.00	tot		\$	0.00
	owe any priority claims - s				hat					
□ No.	Go to line 36.									
■ Yes	. Fill in the total amount of a ongoing priority claims, su	all of these priority claims. Do ch as those you listed in line		clude current or						
	Total amount of all past-o	due priority claims			\$	9,667.34	÷	60	\$	161.12
36. Project	ed monthly Chapter 13 plar	n payment			\$					
Office o the Exe To find a	multiplier for your district as f the United States Courts (fc cutive Office for United State list of district multipliers that inclining the country of this form. This list of the country of the count	or districts in Alabama and N s Trustees (for all other distr udes your district, go online usin	orth Ca icts). g the lin	arolina) or by	X					
·		•	апктири	cy cierk's office.	[Сору			
Average	e monthly administrative expe	ense				\$	here=	:> \$	·	
	II of the deductions for debnes 33e through 36.	t payment.							\$	3,364.89
Total Dedu	ctions from Income									
38. Add all	of the allowed deductions.									
	ine 24, All of the expenses as se allowances		\$	8,906.4	3					
	ine 32, All of the additional e.		\$	1,446.6	0_					
Copy I	ine 37, All of the deductions	for debt payment	+\$	3,364.8	9					
Total o	deductions		\$_	13,717.9	2	Copy total here=>		\$	i	13,717.92

☐ Increase

☐ Decrease

☐ 122C-1

☐ 122C-2

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Khaled N Nasr
Khaled N Nasr
Signature of Debtor 1

Date August 3, 2020

MM/DD/YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2020 to 07/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Afiniti, Inc

Income by Month:

6 Months Ago:	02/2020	\$0.00
5 Months Ago:	03/2020	\$12,307.70
4 Months Ago:	04/2020	\$15,384.62
3 Months Ago:	05/2020	\$23,076.92
2 Months Ago:	06/2020	\$15,384.62
Last Month:	07/2020	\$15,384.60
	Average per month:	\$13,589.74

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Insurance Contract

Income by Month:

6 Months Ago:	02/2020	\$8,000.00
5 Months Ago:	03/2020	\$0.00
4 Months Ago:	04/2020	\$0.00
3 Months Ago:	05/2020	\$0.00
2 Months Ago:	06/2020	\$0.00
Last Month:	07/2020	\$0.00
	Average per month:	\$1,333.33

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

			_		
UNITED STATES BANKRUPTCY COURT					
DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Stuart M. Nachbar 354 Eisenhower Parkway, Suite 2025 P.O. Box 2205 Livingston, NJ 07039 973-567-0954 Stuart@snanj.com					
In Re:			=		
	Khaled N Nasr		Case	e No.:	
			Cha	pter:	13
			Judg	ge:	
Di	ISCLOSURE.	OF CHAPTER 13 DEBTOR	P'S AT	ΓΩΡΝΕ	V COMPENSATION
agreed to with this leads to to an time.	be paid to me, for bankruptcy case is Under D.N.J. LB of the exclusions lise mount of \$4,500 me of the filing of the exercises on because the exercise of	R 2016-5(b), I have agreed to accept for ted below, including administrative section. I understand that I must demonstable this disclosure if I seek additional contents of the debtor in connection with the debtor in: ary proceedings, tigation/loan modification efforts,	or all legal rivices that strate that inpensation the follow	I services r t may occu additional a and reimb ing are not	equired to confirm a plan, subject r postconfirmation, a flat fee in the services were unforeseeable at the oursement of necessary expenses.
	•	nfirmation filings and matters brought			
I	have received:		\$ _	2,500.00	_
	The balance	e due is:	\$_	2,000.00	_
	The balance	e ■ will □ will not be paid through the	e plan.		
ca th	ase, an hourly fee on is client range from	R 2016-5(c), I have agreed to accept for \$ The hourly fee charged by om \$ to \$ I understand that I to me in this case post petition pursua	ther mem must rece	bers of my ive the Co	firm that may provide services to art's approval of any fees or
I	have received:		\$ _		
2. T	he source of the fu	ands paid to me was:			
•	Debtor(s)	☐ Other (specify below)			

3.	If a balance is due, the source of future compensation to be paid to me is:		
	■ Debtor(s)	☐ Other (specify below)	
	I \square have or \blacksquare have not agreed to share compensation with another person(s) unless they are members of my law firm, a copy of that the next and a list of the people sharing in the compensation is attached.		
Date:	August 3, 2020	/s/ Stuart M. Nachbar Stuart M. Nachbar Debtor's Attorney	

United States Bankruptcy CourtDistrict of New Jersey

In re	Khaled N Nasr		Case No.	
		Debtor(s)	Chapter	13
	VER	IFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date:	August 3, 2020	/s/ Khaled N Nasr		
		Khaled N Nasr Signature of Debtor		
of my l	Address List consisting of 8 pknowledge. I further declare that t	ansel for the petitioner(s) in the above-styled page(s) has been verified by comparison to Sche attached Master Address List can be relied to me by the debtor(s) in the above-style	chedules D throug d upon by the Cle	h H to be complete, to the best rk of Court to provide notice to
Date:	August 3, 2020	/s/ Stuart M. Nachbar Signature of Attorney Stuart M. Nachbar Law Office of Stuart M. Nach	bar. P.C.	

Law Office of Stuart M. Nachbar, P.C. 354 Eisenhower Parkway, Suite 2025 P.O. Box 2205 Livingston, NJ 07039 973-567-0954 Fax: 973-629-1294

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

American Express Bankruptcy Processing PO Box 8053 Mason, OH 45040

American Express Bankruptcy Processing PO Box 8053 Mason, OH 45040

AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

Amex

Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Amex

Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Attorney General United States Department of Justice Ben Franklin Station P.O. Box 683 Washington, DC 20044

Bank of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998 Bank of America 4909 Savarese Circle F11-908-01-50 Tampa, FL 33634

Bank of America 4909 Savarese Circle F11-908-01-50 Tampa, FL 33634

Bank of America 4909 Savarese Circle F11-908-01-50 Tampa, FL 33634

Bank of America 4909 Savarese Circle Fl1-908-01-50 Tampa, FL 33634

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Barclays Bank Delaware Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899

Barclays Bank Delaware Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899

Bmw Financial Services Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Carter Ledyard & Millbrun, LLP 2 Wall Street Attn: Barnara Brown, Esq New York, NY 10005

Chase P.O. Box 6026 MailCode IL1-0054 Chicago, IL 60680-6026

Chase Auto Finance Attn: Bankruptcy Po Box 901076 Fort Worth, TX 76101

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

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Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citibank Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179

Citibank Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179 Comenitybank/Jared Attn: Bankruptcy Po Box 182273 Columbus, OH 43218

Costco Anywhere Visa Card Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117

Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

Doyle & Hoefs, LLC 2043 Springwood Road York, PA 17403

Doyle & Hoefs, LLC 2043 Springwood Road York, PA 17403

Hackensack Meridian Health PO Box 8505 Pompano Beach, FL 33075

Hsbc Bank Attn: Bankruptcy Po Box 2013 Buffalo, NY 14240

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346 Lasser Law Group, PLLC 633 Third Avenue Suite 1301 New York, NY 10017

Mercedes-Benz Financial Services Attn: Bankruptcy Dept Po Box 685 Roanoke, TX 76262

Mercedes-Benz Financial Services Attn: Bankruptcy Dept Po Box 685 Roanoke, TX 76262

NEw Jersey Healthcare Specialists, PC P.O. Box 412138 Boston, MA 02241-2138

New Jersey Urology, LLC 1515 Broad Street Suite B130 Bloomfield, NJ 07003-3002

Nissan Motor Acceptance Corp/Infiniti Attn: Bankruptcy Po Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corp/Infiniti Attn: Bankruptcy Po Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corp/Infiniti Attn: Bankruptcy Po Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corp/Infiniti Attn: Bankruptcy Po Box 660360 Dallas, TX 75266 North Jersey Healthcare Specialists, PC P.O. Box 412138 Boston, MA 02241-2138

OneWest Bank Mortgage Servicing Attn: Bankruptcy, OneWest Bank Po Box 7056 Pasadena, CA 91109

Paramount Leasehold LP 1501 Broadway 19th Floor Attn: Building Manger New York, NY 10036

Paramount Leasehold LP c/o Levin managment Corp Attn: Matthew Harding 975 US Highway 22 West Plainfield, NJ 07060

Paramount Leasehold, LP c/o Karar Associates Attn: Stanley Garber One Rockefeller Plaza, Suite 1708 New York, NY 10020

Petroff Amshen, LLP 1795 Coney Island Avenue 3rd Floor Brooklyn, NY 11230

PHH Mortgage Services Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409

PHH Mortgage Servicing Attn: Bankruptcy Department Po Box 5452 Mount Laurel, NJ 08054

Quest Diagnostics, Inc P.O. Box 7308 Hoffater, MO 65873-7308 Quest Diagnostics, Inc P.O. Box 7308 Hoffater, MO 65873-7308

Sterling Jewelers/Jared Attn: Bankruptcy 375 Ghent Rd Akron, OH 44333

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/PayPal Cr Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896